RIVERVIEW MANOR

WISCONSIN RAPIDS 54495 Phone: (715) 421-7468		Ownership:	Non-Profit Corporation
Operated from 1/1 To 12/31 Days of Operation:	365	Highest Level License:	Skilled
Operate in Conjunction with Hospital?	Yes	Operate in Conjunction with CBRF?	No
Number of Beds Set Up and Staffed (12/31/03):	114	Title 18 (Medicare) Certified?	Yes
Total Licensed Bed Capacity (12/31/03):	114	Title 19 (Medicaid) Certified?	Yes
Number of Residents on 12/31/03:	98	Average Daily Census:	103

Services Provided to Non-Residents		Age, Gender, and Primary Di	agnosis	of Residents	(12/31/03)	Length of Stay (12/31/03)	%
Home Health Care Supp. Home Care-Personal Care	No No	Primary Diagnosis		Age Groups	용	 Less Than 1 Year 1 - 4 Years	16.3 34.7
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	4.1	More Than 4 Years	18.4
Day Services Respite Care	No No	Mental Illness (Org./Psy) Mental Illness (Other)		65 - 74 75 - 84	6.1 27.6	•	69.4
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	49.0	* * * * * * * * * * * * * * * * * * *	*****
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	1.0	95 & Over		Full-Time Equivalent	
Congregate Meals	No	Cancer	6.1			Nursing Staff per 100 Res	idents
Home Delivered Meals	No	Fractures			100.0	(12/31/03)	
Other Meals	No	Cardiovascular	6.1	65 & Over	95.9		
Transportation	No	Cerebrovascular	11.2			RNs	14.1
Referral Service	No	Diabetes	2.0	Gender	용	LPNs	5.7
Other Services	No	Respiratory	3.1			Nursing Assistants,	
Provide Day Programming for		Other Medical Conditions	29.6	Male	24.5	Aides, & Orderlies	52.6
Mentally Ill	No			Female	75.5		
Provide Day Programming for		[100.0				
Developmentally Disabled	No	1		1	100.0		
*********	****	********	*****	******	*******	*******	******

Method of Reimbursement

		Medicare			edicaid itle 19			Other		:	Private Pay			amily Care			anaged Care			
Level of Care	No.	90	Per Diem (\$)	No.	οlo	Per Diem (\$)	No.	્ર	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Total Resi- dents	- Of
Int. Skilled Care	0	0.0	0	3	5.0	133	0	0.0	0	1	3.7	177	0	0.0	0	0	0.0	0	4	4.1
Skilled Care	11	100.0	273	56	93.3	114	0	0.0	0	24	88.9	167	0	0.0	0	0	0.0	0	91	92.9
Intermediate				1	1.7	96	0	0.0	0	2	7.4	152	0	0.0	0	0	0.0	0	3	3.1
Limited Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain In	j 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Depende	nt 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	11	100.0		60	100.0		0	0.0		27	100.0		0	0.0		0	0.0		98	100.0

RIVERVIEW MANOR

Admissions, Discharges, and		Percent Distribution	n of Residents'	Condit	ions, Services,	and Activities as of 12/	31/03
Deaths During Reporting Period							
					% Needing		Total
Percent Admissions from:	I	Activities of	%	As	sistance of	% Totally	Number of
Private Home/No Home Health	6.9	Daily Living (ADL)	Independent	One	Or Two Staff	Dependent	Residents
Private Home/With Home Health	0.0	Bathing	6.1		68.4	25.5	98
Other Nursing Homes	0.7	Dressing	12.2		65.3	22.4	98
Acute Care Hospitals	91.6	Transferring	26.5		50.0	23.5	98
Psych. HospMR/DD Facilities	0.0	Toilet Use	26.5		50.0	23.5	98
Rehabilitation Hospitals	0.0	Eating	52.0		27.6	20.4	98
Other Locations	0.7	******	*****	*****	*****	******	*****
Total Number of Admissions	275 I	Continence		용	Special Treat	ments	용
Percent Discharges To:		Indwelling Or Extern	nal Catheter	3.1	Receiving F	Respiratory Care	13.3
Private Home/No Home Health	51.2	Occ/Freq. Incontiner	nt of Bladder	62.2	Receiving 1	Tracheostomy Care	1.0
Private Home/With Home Health	0.0	Occ/Freq. Incontiner	nt of Bowel	24.5	Receiving S	Suctioning	0.0
Other Nursing Homes	1.7				Receiving (Ostomy Care	4.1
Acute Care Hospitals	8.4	Mobility			Receiving 7	Tube Feeding	4.1
Psych. HospMR/DD Facilities	0.0	Physically Restraine	ed	3.1	Receiving N	Mechanically Altered Diets	31.6
Rehabilitation Hospitals	0.0						
Other Locations	12.5	Skin Care			Other Resider	nt Characteristics	
Deaths	26.1	With Pressure Sores		5.1	Have Advanc	ce Directives	86.7
Total Number of Discharges	i	With Rashes		3.1	Medications		
(Including Deaths)	287 i				Receiving E	Psychoactive Drugs	43.9

Selected Statistics: This Hospital-Based Facility Compared to Similar Facilities & Compared to All Facilities

	This Other Hospital-		Hospital-	Ī	All
	Facility	Based Facilities		Fac	ilties
	%	용	Ratio	8	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	88.9	90.1	0.99	87.4	1.02
Current Residents from In-County	92.9	83.8	1.11	76.7	1.21
Admissions from In-County, Still Residing	15.3	14.2	1.08	19.6	0.78
Admissions/Average Daily Census	267.0	229.5	1.16	141.3	1.89
Discharges/Average Daily Census	278.6	229.2	1.22	142.5	1.96
Discharges To Private Residence/Average Daily Census	142.7	124.8	1.14	61.6	2.32
Residents Receiving Skilled Care	96.9	92.5	1.05	88.1	1.10
Residents Aged 65 and Older	95.9	91.8	1.04	87.8	1.09
Title 19 (Medicaid) Funded Residents	61.2	64.4	0.95	65.9	0.93
Private Pay Funded Residents	27.6	22.4	1.23	21.0	1.31
Developmentally Disabled Residents	0.0	1.2	0.00	6.5	0.00
Mentally Ill Residents	27.6	32.9	0.84	33.6	0.82
General Medical Service Residents	29.6	22.9	1.29	20.6	1.44
Impaired ADL (Mean)*	49.6	48.6	1.02	49.4	1.00
Psychological Problems	43.9	55.4	0.79	57.4	0.77
Nursing Care Required (Mean) *	7.8	7.0	1.11	7.3	1.06